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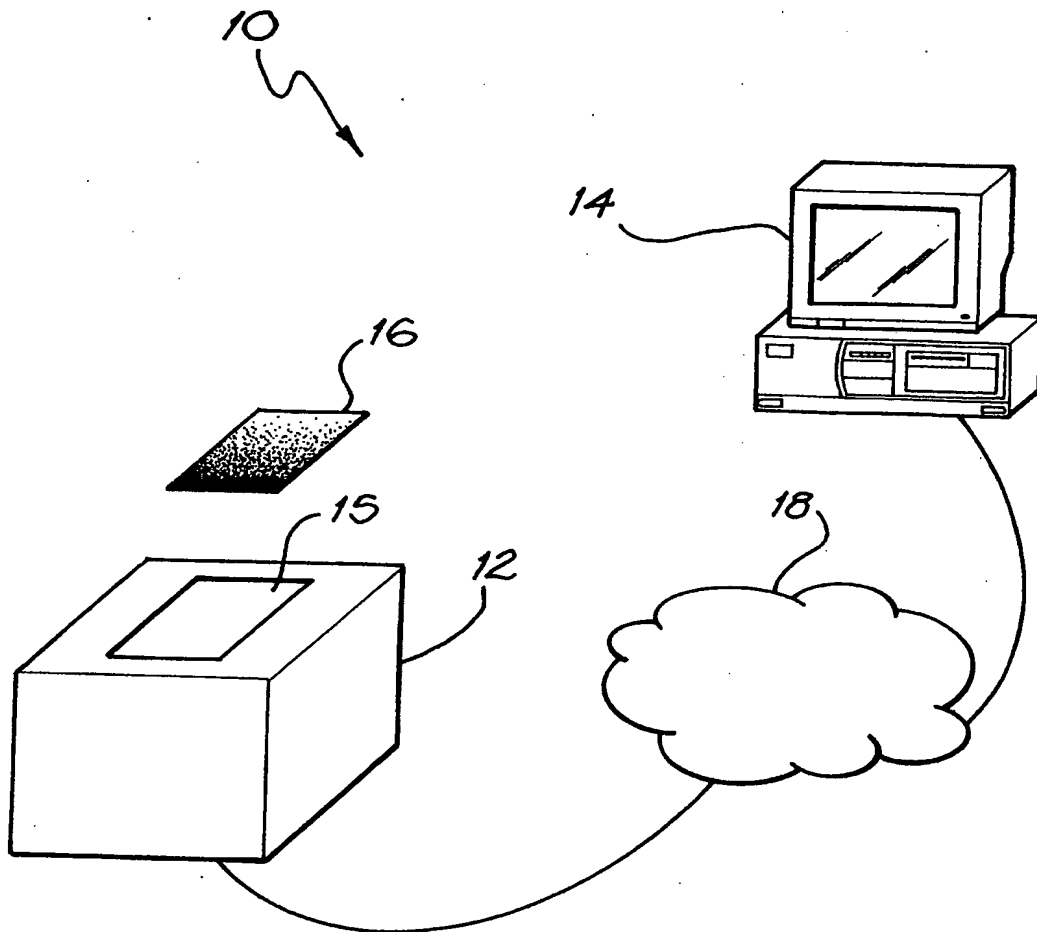


FIG. 1



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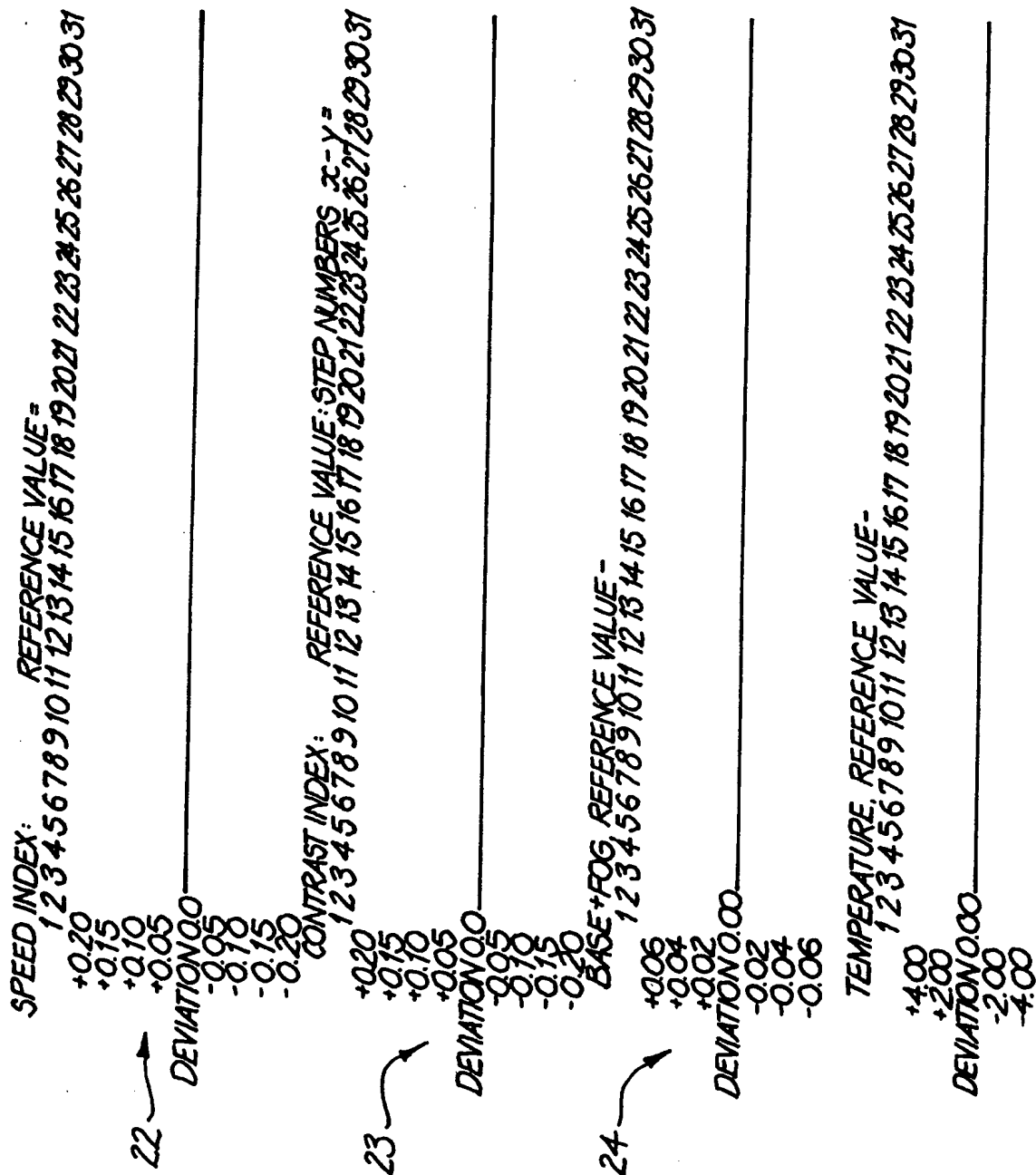


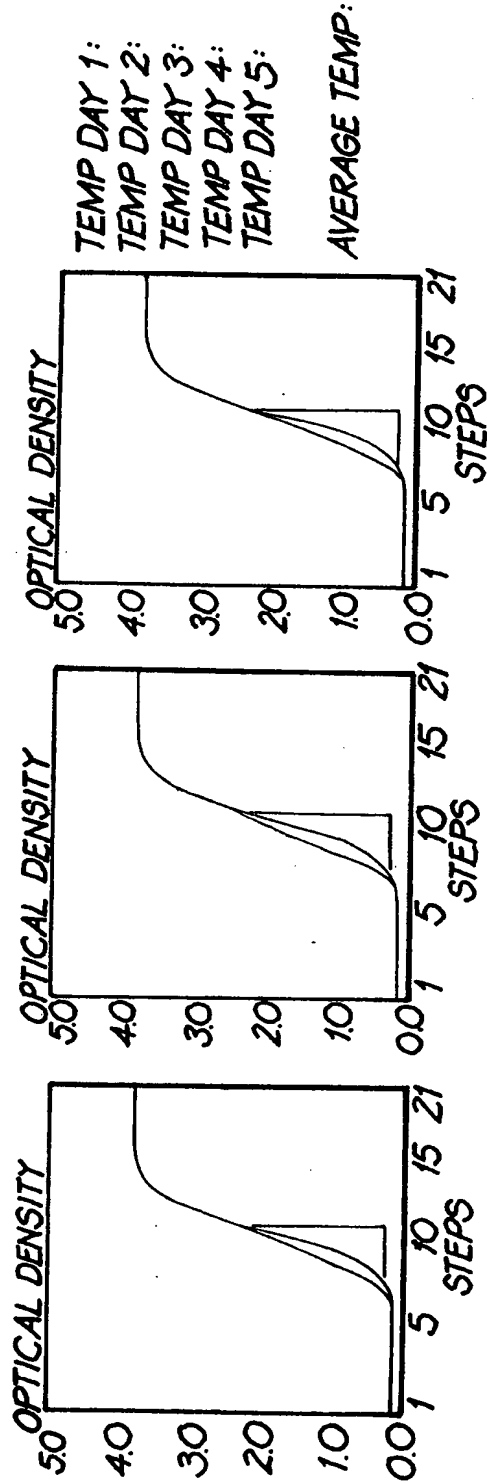
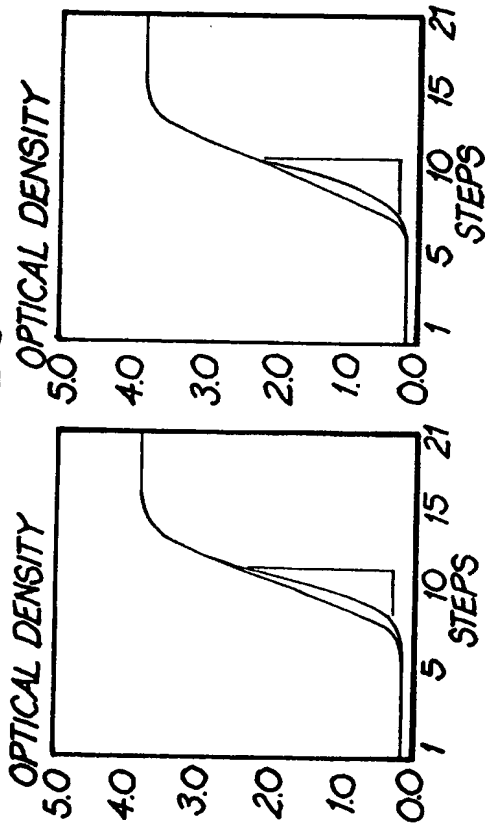
FIG. 2b

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GAMMASONICS DIAGNOSTIC STRIP FILM ANALYSIS REPORT

OWNER: SITE ADDRESS: PHONE: EMAIL/FAX:  
 CONTACT: TEST DATE:  
 SITE ID:

FILM MAKE:  
 FILM TYPE:  
 EMULSION NO:  
 EXP DATE:  
 PROCESSOR MAKE:  
 PROCESSOR MODEL:  
 PROCESSOR SERIAL:



TEMP DAY 1:  
 TEMP DAY 2:  
 TEMP DAY 3:  
 TEMP DAY 4:  
 TEMP DAY 5:  
 AVERAGE TEMP:

FIG. 3a

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FIG. 3b

[illegible]